



BOARD NOTES

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BOARD STATEMENT OF POLICY ON VACCINATION PROTOCOLS AND INFORMED CONSENT

In February 2003, the Board adopted AN OPEN LETTER TO VETERINARIANS RE: VACCINATION PROTOCOLS. In the LETTER, the Board noted that many aspects of veterinary practice were evolving quickly, including the area of vaccination protocols – vaccination intervals, durations of immunity, risks of vaccination, and the efficacy of certain vaccines that are routinely used by many veterinarians. Recent studies have cast new light on these issues, prompting organizations such as the American Veterinary Medical Association, American Association of Feline Practitioners, and American Animal Hospital Association, to issue reports suggesting a need to revise some commonly accepted practices.

While the Board has stated that it does not intend to “micro manage” the practice of veterinarians in this area, it did recommend that veterinarians keep informed of the latest developments in vaccines and vaccinations; communicate with clients the benefits and risks associated with the administration of any given vaccine; and seek the client’s consent to the vaccinations offered. The Board followed up with a reminder in the November 2004 *Board Notes*, again urging veterinarians to review their vaccination protocols. The Board noted that mere adherence to custom may, in some cases, be insufficient to meet the evolving standard of care for administering various vaccines. For example, coronavirus vaccines are still being routinely prescribed for dogs and cats by some veterinarians, although recently published positions of the veterinary associations unanimously do not recommend them.

The Board believes that veterinarians are becoming aware of the vaccination issues and changes are being made. Some are beginning to discuss with their clients the concept of “core” versus “non-core” vaccines. Clients are also becoming better informed on vaccination issues. One area that is still of concern is that of informed consent. Indications are that not enough is being done to inform the client of the need for the offered vaccines and the securing of informed consent. This simply involves a veterinarian providing enough information about the vaccines to the client so that he or she can give a reasoned consent to the recommended vaccines. This, in turn, requires a discussion of risks versus benefits of vaccination on a pet-by-pet basis. The benefits of certain vaccines, for example, distemper and parvovirus, are well known health threats and do not require detailed explanation, while a vaccine for Lyme Disease, where risk is not the same in all locations, may need more explanation. Options to a vaccine may be available. Less frequent vaccinations may provide the necessary protection in many cases.

Once the risks and benefits of the vaccines have been explained to a client, the veterinarian should seek the client’s consent for the recommended vaccines. A written “authorization to vaccinate” is recommended, but if a written authorization is not used, the patient record should be carefully noted to show that the client approved the vaccines after an explanation of benefits and risks. Examples of model consent forms are now widely available.

Informed consent is not a new concept in veterinary medicine. Veterinarians routinely seek consent for treatments for their patients. The Board believes that informed consent should become the standard for vaccination protocols as well. Veterinarians are urged to consider this matter with the goal in mind of improving veterinary services for all their patients.